"PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885



INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate, All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1 by (a) specifying a new corrected below or directed otherwise in Block 1 by (a) specifying a new corrected below or directed otherwise in Block 1 by (a) specifying a new corrected below or directed otherwise in Block 1 by (a) specifying a new corrected below or directed otherwise in Block 1 by (a) specifying a new corrected below or directed otherwise in Block 1 by (a) specifying a new corrected below or directed otherwise in Block 1 by (a) specifying a new corrected below or directed otherwise in Block 1 by (a) specifying a new corrected below or directed otherwise in Block 1 by (a) specifying a new corrected below or directed otherwise in Block 1 by (a) specifying a new corrected below or directed otherwise in Block 1 by (a) specifying a new corrected below or directed otherwise in Block 1 by (a) specifying a new corrected below or directed otherwise in Block 1 by (a) specifying a new corrected below or directed otherwise in Block 1 by (a) specifying a new corrected below or directed otherwise in Block 1 by (a) specifying a new corrected below or directed otherwise in Block 2 by (a) specifying a new corrected by the corrected by t

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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
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						(Depositor's name)
						(Signature)
						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	1	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/830,986	05/03/2001		Andreas Bernkop-Schnurc	h	030560-056	7285
TITLE OF INVENTION: N						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE		
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EXAMIN	ER	ART UNIT	CLASS-SUBCLASS	J 01 FC:250	1 720.00 DA	
RAMACHANDRAN, U		1617	424-486000			
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
(A) NAME OF ASSIGN	s an assignee is ident n 37 CFR 3.11. Comp IEE	ified below, no assignee eletion of this form is NO	data will appear on the pT a substitute for filing an (B) RESIDENCE: (CITY	astent. If an assigned assignment. Y and STATE OR CO	OUNTRY)	document has been filed for
Please check the appropriate	e assignee category or	categories (will not be p	rinted on the patent):	Individual 🗆 Cor	poration or other private gr	oup entity Government
4a. The following fee(s) are submitted: X Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. XX The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 02-4800 (enclose an extra copy of this form).			
5. Change in Entity Status a. Applicant claims S	MALL ENTITY statu	s. See 37 CFR 1.27.			L ENTITY status. See 37 C	
NOTE: The Issue Fee and Finterest as shown by the rec	Publication Fee (if requords of the United Sta	nired) will not be accepte tes Patent and Trademark	d from anyone other than to Office.	the applicant; a regist	tered attorney or agent; or t	he assignee or other party in
Authorized Signature	Sersan 4	1 per	>	DateFe	bruary 14, 2008	3
Typed or printed name	Susan M.			Registration No		
submitting the completed at this form and/or suggestion Box 1450, Alexandria, Virg Alexandria, Virginia 22313	pplication form to the s for reducing this bur tinia 22313-1450. DO -1450.	U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to th NOT SEND FEES OR	1.14. This collection is esty depending upon the individual to the complete the com	timated to take 12 m vidual case. Any comer, U.S. Patent and T O THIS ADDRESS.	inutes to complete, including ments on the amount of ti	for Patents, P.O. Box 1450,



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

n re Patent Application of) MAIL STOP ISSUE FEE
Andreas Bernkop-Schnurch) Confirmation No.: 7285
Application No.: 09/830,986)
Filing Date: May 3, 2001))
Title: MUCO-ADHESIVE POLYMERS, USE THEREOF AND METHOD FOR PRODUCING THE SAME)))

PAYMENT OF ISSUE FEE AND AUTHORIZATION TO CHARGE DEPOSIT ACCOUNT FOR ANY DEFICIENCY

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Attached is an Issue Fee Transmittal form (form PTOL-85). The Director is hereby authorized to charge any fees under 37 C.F.R. §§ 1.18, 1.19, and 1.21 that may be required by the attached Issue Fee Transmittal Form, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BUCHANAN INGERSOLL & ROONEY PC

Date: February 14, 2008

Registration No. 40373

P.O. Box 1404 Alexandria, VA 22313-1404 703 836 6620